

**APPLICATION FOR A CONDITIONAL USE PERMIT
TOWN OF FREMONT, N.H.**

Name of Applicant(s): Joseph & Doris Nichols
Address: 102 Chester Road, Fremont, NH 03044
Owner(s) of Property concerned: Same
(If same as above, write "same")

Mailing Address: Same
(If same as above, write "same")

Contact information:
603-234-3228 jnichols341@gmail.com

Location of Property: Tax Map 1, Lot 25, 102 Chester Road
(Map #, Lot # and Street Address)

ZONING INFORMATION

Zoning District of Property: Flexible Use Residential
Conditional Use Permit Required: Yes x No

Is the property in the Aquifer Protection District? Yes x No
Is the property in the Flood Zone? Yes x No

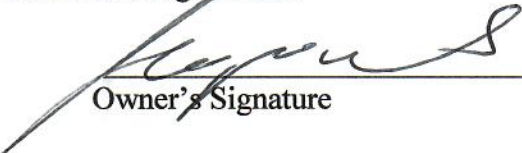
CONDITIONAL USE PERMIT - GIVE A BRIEF DESCRIPTION OF THE PROJECT

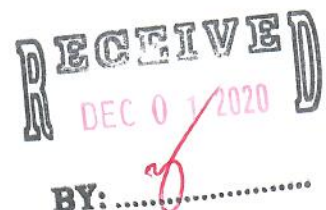
We are requesting a conditional use permit to allow a home occupation
for Environmental permitting. The home occupation will take place in an
existing building located on the property septate from the dwelling.

The existing building was previously used by past owners as a retail shop / farm stand.
The home occupation, does not produce any hazards, or store any waste on site.

It is only for generating paper plans for permitting, all other work is done off site.
"I hereby authorize the Fremont Planning Board and its agents to access my land for the purpose of reviewing this plan, performing road inspections and any other inspections deemed necessary by the Board or its agents, to insure conformance of the on-site improvements with the approved plan and all Town of Fremont ordinances and regulations."

11-24-2020
Date


Owner's Signature



**CHECK LIST FOR PREPARING CONDITIONAL USE PERMIT APPLICATION
THIS CHECKLIST FORM MUST ACCOMPANY EACH APPLICATION**

(signed by the actual owner)

(Processing of this application will be significantly delayed if it is not complete)

- X Six (6) full size and eight (8) 11" x 17" sets of plans; at least two (2) of the full size plans will be colored = see appendix "C" of the Subdivision Regulations.
- X Copy of this "Checklist for Preparing Conditional Use Application" signed by the owner or legal representative.
- X A **typed current abutters list** (checked at the Town Office not longer than ten (10) days prior to submission)
- X **The proper check amount**
\$100.00 for the fee
\$115.00 for the advertising (no newspaper advertising)
\$ 12.59 per abutter (**\$6.00 plus current postage**) The Abutters list shall include the actual owner, anyone whose stamp or seal appears on the plan, anyone whose property physically abuts or is directly across a street or river from the subject property)
(see NH RSA 672:3)
- X I do hereby certify that this application for a Conditional Use Permit meets all Fremont Zoning Regulation requirements.
- X I do hereby agree that I am responsible for all costs for all consulting costs regarding this Plan Review.
- X A copy of the plan has been submitted to the Rockingham Planning Commission.


signature:

The application, including this checklist sheet signed by the actual owner, must be sent via certified mail to:

FREMONT PLANNING BOARD
P.O. Box 120
Fremont, New Hampshire 03044